

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86 257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

| | |
|---|--|
| 1 File Number U <u>9423</u> | 2 Fiscal Year Covered From <u>1</u> / <u>1</u> / <u>2004</u> Through <u>2</u> / <u>31</u> / <u>2004</u> |
| 3 Name and address of person filing Name <u>John</u> <u>C</u> <u>Burkard</u> P O Box Bldg Room No if any Street <u>4415 W. Harrison</u> City <u>Hillside</u> State <u>IL</u> ZIP Code + 4 <u>60162</u> | 4 Name file number and address of labor organization Name <u>IBEW Local 9</u> Labor Organization File Number <u>015919</u> P O Box Building and Room Number if any Street <u>4415 W Harrison St</u> City <u>Hillside</u> State <u>IL</u> ZIP Code + 4 <u>60162</u> |
| 5 Position in labor organization <u>Asst Business Manager</u> | |

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

| | |
|--|---|
| A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent | |
| 6 Name and address of Employer (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4 | 7 a Nature of Interest, Transaction or Income 7 b Amount |

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)

Signed

John C Burkard

On

8/12/2005
Date

708 449 9000
Telephone Number



LOCAL UNION No. 9
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
AFL-CIO

4415 W HARRISON ST
SUITE 330
HILLSIDE IL 60162 1902
(708) 449 9000
FAX (708) 449 9001



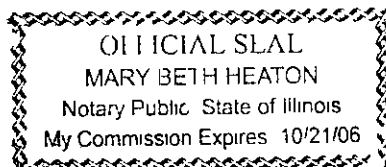
August 12, 2005

To Whom It May Concern

On December 14, 2004, my briefcase was inadvertently left on the roof of my vehicle when I left the office. My briefcase which was lost contained my day planner which also included my business expenditures. Therefore, I do not have any records of the year 2004.

I am aware of several transactions that would normally be reported on Form LM-30, Section B, however because of the above circumstance I do not have the details of the transactions and therefore unable to report information completely and properly.

John C Burkard
Assistant Business Manager



Name of Person Filing

John Burkard

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Middle States Elec Cont ASS.Trade Name if any P O Box Bldg Room No if any Street 245 Fencil LnCity HillsideState IL ZIP Code + 4 60162

9 Business deals with

☐ a Labor Organization☐ b Trust☒ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Middle States Elec Cont ASS.Trade Name if any P O Box Bldg Room No if any Street 245 Fencil LnCity HillsideState IL ZIP Code + 4 60162

11 a Nature of such dealing

Middle States CONTRACTORS ASS.

11 b Approximate dollar value of such dealing.

UNKNOWN

12 a Nature of interest held or income received

CHRISTMAS DINNER

12 b Amount.

APPROX 500⁰⁰

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing

John Burkard

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name GOLD BERG, W PISMILAN & CAIRO, LTD

Trade Name if any

P O Box Bldg Room No if any 34th FloorStreet ONE EAST WACKER DR. 34th FloorCity CHICAGOState ILL ZIP Code + 4 60601

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name IBEW Local 7

Trade Name if any

P O Box Bldg Room No if any 530Street 4415 W. MARILYN STCity HillsideState IL ZIP Code + 4 60192

11 a Nature of such dealing

LAWYER THAT REPRESENTS
MEMBERS OF LABOR ORGANIZATION
ON WORKMANS COMP CASES

11 b Approximate dollar value of such dealing

UNKNOWN

12 a Nature of interest held or income received

Luncheon

12 b Amount

Est \$5.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing

John Burkard

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name GOLD BEAG, W. P. SMITH & CLARK, LTD

Trade Name if any

P O Box Bldg Room No if any 34th FloorStreet ONE EAST WACKER DR. 34th FloorCity CHICAGOState ILL ZIP Code + 4 60601

9 Business deals with



a Labor Organization



b Trust



c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name FBI Local 117

Trade Name if any

P O Box Bldg Room No if any 630Street 4415 W. MADISON STCity HillsideState IL ZIP Code + 4 60192

11 a Nature of such dealing

LAWYER THAT REPRESENTS
MEMBERS OF LABOR ORGANIZATION
ON WOMAN'S COMP CASES

11 b Approximate dollar value of such dealing.

UNKNOWN

12 a Nature of interest held or income received

SPONSORED DINNER AT
ILL ELECTRICAL CONFERENCE
FALL SESSION 2004

12 b Amount.

EST 60.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐

?

14 b Amount of payment

| | |
|---|---------------|
| Name of Person Filing <u>John Burkard</u> | File Number U |
|---|---------------|

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Robert E Fitzgerald
Trade Name if any
P O Box Bldg Room No if any
Street 714 W Burlington
City LAGRANGE
State IL ZIP Code + 4 60525

9 Business deals with

- ☒ a Labor Organization
☐ b Trust
☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Robert E. Fitzgerald
Trade Name if any
P O Box Bldg Room No if any
Street 714 W. Burlington
City LAGRANGE
State IL ZIP Code + 4 60525

11 a Nature of such dealing

UNION ATTORNEY

11 b Approximate dollar value of such dealing APP 35,000

12 a Nature of interest held or income received

Christmas - GIFT 12/04

12 b Amount 67.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name
Trade Name if any
P O Box Bldg Room No if any
Street
City
State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing

John Burkard

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name TED Disabato

Trade Name if any Clark & Assoc

P O Box Bldg Room No if any

Street 333 W Wacker

City Chicago

State IL ZIP Code + 4 60606

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Line Clearance Benefit & Pension Funds

Trade Name if any

P O Box Bldg Room No if any

Street 6525 Centurion Dr

City Lansing

State MI ZIP Code + 4 48917

11 a Nature of such dealing

Investment Consultant

11 b Approximate dollar value of such dealing

34,500

12 a Nature of interest held or income received

Dinner following Line Clearance
Membership Meeting

12 b Amount

3500

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐

?

14 b Amount of payment

Name of Person Filing

John Burkard

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Qu Kelly MurrellTrade Name if any Qualified Plans Cont Inc

P O Box Bldg Room No if any

Street 3013 S Wolf RdCity WestchesterState IL ZIP Code + 4 60154

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Lineclearance Benefit FundTrade Name if any FTC International

P O Box Bldg Room No if any

Street 6525 Centurion DrCity LansingState MI ZIP Code + 4 48917

11 a Nature of such dealing

Christmas Lunch

11 b Approximate dollar value of such dealing

~~Approx 500~~ unknown

12 a Nature of interest held or income received

12 b Amount

60.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐ ?

14 b Amount of payment